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2200 Mission College Blvd.
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Intel Legal Team

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Page 1 of 10

Date: 7-Dec-04

To: Mark A. Connolly Fax: 703-872-9306 Phone: 703-305-7849
United States Patent and Trademark Office

From: David N. Tran Fax: 408-765-7723 Phone: 408-765-4692

Subject: Amendment in Application Serial No. 10/033,551

A CONFIRMATION COPY OF THIS DOCUMENT:

WILL NOT BE SENT

Application No.: 10/033,551
Filing Date: 12/27/2001
First Named Inventor: Aaron M. Tsirkel
Group Art Unit: 2115
Examiner Name: Mark A. Connolly
Attorney Docket No.: 42390.P11087X

Enclosures:

1. Transmittal Form (1 page)
2. Fee Transmittal (1 page)
3. Response to Office Action (7 pages)

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PTO/SB/17 (10-03)

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL

for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 0.00)

Complete if Known

Application Number	10/033,551	RECEIVED
Filing Date	December 27, 2001	CENTRAL FAX CENTER
First Named Inventor	Aaron M. Tsirkel	
Examiner Name	Mark A. Connolly	DEC 07 2004
Art Unit	2115	
Attorney Docket No.	42390.P11087X	

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None
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Deposit Account Number

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Deposit Account Name

Intel Corporation

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- Charge fee(s) indicated below Credit any overpayments
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FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)		(\$ 0.00)	

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Independent Claims	Multiple Dependent	Fee from Extra Claims below	Fee Paid
			-20** = 0 X 18	= 0
			- 3** = 0 X 84	= 0
				280 = 0

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 88	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid
1204 88	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		(\$ 0.00)

** or number previously paid, if greater. For Reissues, see above

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 420	2252 210	Extension for reply within second month	
1253 950	2253 475	Extension for reply within third month	
1254 1,480	2254 740	Extension for reply within fourth month	
1255 2,010	2255 1,005	Extension for reply within fifth month	
1401 330	2401 165	Notice of Appeal	
1402 330	2402 165	Filing a brief in support of an appeal	
1403 290	2403 145	Request for oral hearing	
1451 1,510	1451 1,510	Petition to Institute a public use proceeding	
1452 110	2452 65	Petition to revive - unavoidable	
1453 1,330	2453 665	Petition to revive - unintentional	
1501 1,330	2501 665	Utility issue fee (or reissue)	
1502 480	2502 240	Design issue fee	
1503 640	2503 320	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination or of a design application	
Other fee (specify)		_____	
*Reduced by Basic Filing Fee Paid		SUBTOTAL (3)	(\$ 0.00)

(Complete if applicable)

Name (Print/Type)	Signature	Registration No. (Attorney/Agent)	Telephone
David N. Tran		50,804	408-765-4692

Date 12/07/2004

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PTO/SB/21 (03-03)

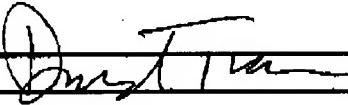
Approved for use through 04/30/2003. OMB 0651-0031

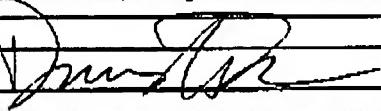
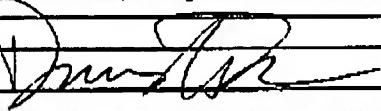
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number 10/033,551
		Filing Date December 27, 2001
		First Named Inventor Aaron M. Tsirkel
		Art Unit 2115
		Examiner Name Mark A. Connolly
Total Number of Pages in This Submission 9		Attorney Docket Number 42890.P11087X

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ Remarks	<input type="checkbox"/> After Allowance Communication to a Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual	David N. Tran
Signature	
Date	December 7, 2004

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Typed or printed	David N. Tran	
Signature		Date December 7, 2004

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